RESI AVAILABLE COPY

	PATENT	Effectiv	ve Decem	RD		\bigcirc	3/	:219	5 ⁻ 9					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		lг	RATE	FEE	7	RATE			
BASIC FEE							4,300			345.00	OR		FEE 690.00	
TO	OTAL CLAIMS		64 minus 20= - 44				Note Though	 	Ve o		10"		 	
INI	DEPENDENT C	LAIMS	1	O minus	3 -	. 5		┨┠	X\$ 9=		OR	X\$18=	792	
MULTIPLE DEPENDENT CLAIM PRESENT							╽┟	X39=	<u> </u>	OR	X78=	546		
								1	+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	2028		
CLAIMS AS AMENDED - PART II 4-79-0								φ				OTHER		
- ·			umn 1) AIMS	T* 1 1		Column 2) HIGHEST	(Column 3)		MALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	2	AI AME		AINING TER IDMENT		NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 16	17	Minus	**	104	=		X\$ 9=		OR	X\$18=	1	
	Independent	*	Minus N OF MULTIPLE DEP		***	10	=		X39=		OR	AR	1	
	THOTTRES	INTATE	N OF M	OLTIPLE DE	PENL	DENT CLAIM			130=		1	330	/	
	Q-28-9/						L	TOTAL		OR	TOTAL			
	0	(Coli	umn 1)		(0	Column 2)	(Column 3)	ADI	DIT. FEE	<u> </u>	OR .	ADDIT. FEE		
AMENDMENT B	REM		AIMS AINING TER			HIGHEST NUMBER	PRESENT EXTRA	Г		ADDI-	1		ADDI-	
		AMEN		MENT		PAID FOR		RATE	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total Independent	· /	7	Minus	**	64	= ·	>	(\$ 9=		OR	X\$18=		
			N OF MI	Minus	PEND	ENT CLAIM	=	,	(39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								Ŀ	130=		OR	- +260=		
								ADD	TOTAL IT. FEE		OR ,	TOTAL ADDIT, FEE		
_			imn 1)			olumn 2)	(Column 3)							
Z		REM/	NINING TER DMENT		PR	HIGHEST NUMBER EVIOUSLY VAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	*		Minus	••		=	T,	\$ 9=	FEE		VC40	FEE	
	Independent	٠		Minus	***		=	-			OR	X\$18=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								LX	39=		OR	X78=		
. 14	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+260≂	l	
••••	""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT, FEE		
1	he "Highest Num	ber Previ	ously Paid	For (Total or	Indep	endent) is the	highest number	found in	the app	ropriate box	in colu	ጠ ስ 1 .	1	

Application or Docket Number